

2009 Pendleton Co. Recreation High School Intramural Basketball Registration Form



Participant's Name: _____ Gender: ☐ Male ☐ Female
Parent/Legal Guardian: _____ Home Phone: _____
Address: _____ Cell Phone: _____
List Allergies: _____ Grade: _____ Em. Phone: _____

Emergency Contact if parent/legal guardian listed above cannot be reached:

Name: _____ Relationship to participant: _____
Phone: _____ ☐ Home ☐ Work ☐ Cell

Shirt Size: Youth Large Adult Small Adult Medium Adult Large Adult X-Large

Registration Fee: \$50.00 per participant, \$125.00 for a family with 3 or more participants

Due Date: December 7, 2009

Late fee of \$15.00 will be added after December 7, 2009

Registration forms will not be accepted after December 14, 2009.

Participants will not be added to a roster until all fees are paid including late fees.

An additional fee of \$20.00 will be added if a participant switches teams after the uniform order.

Make Checks payable to: Pendleton Co. Recreation

- As the parent/legal guardian of the player named above, I give approval for her/his participation in any/all athletic activities during the current season. I agree that the participant is in good physical condition and has no disease or injury that would keep the participant from taking part in these activities. I assume all risks and hazards incidental to such participation including transportation to and from the activities and do hereby waive, release, absolve, indemnify, and agree to hold harmless Pendleton County Recreation, the organizers, sponsors, supervisors, participants, and persons transporting my child to and from activities for any claim arising out of an injury to my child.
- All participants must have health insurance in force by the registration date. I, _____, have adequate insurance coverage to protect my interests and the interests of the named child in connection with the named activities. Pendleton Co. Recreation Youth Basketball will not be responsible for injuries or loss of property.
- All participants must have a physical on file with Pendleton Co. Recreation before the first practice.
- I have read, understand, and agree to abide by the player/parent code of conduct list on the back of this form.
☐ Yes ☐ No

Dear Parents: We are always in need of volunteer help. Coaching only takes 2-3 hours each week. Without coaches, the program would not be successful. Please indicate below the position you would be willing to accept.

Head Coach: _____

Assistant Coach: _____

Parent/Legal Guardian

Date

Student

Date

For Office Use Only

Amount Paid: _____ Check: ☐ Cash: ☐ Date: _____

**Mail Checks to: Pendleton Co. Recreation
233 Main Street
Falmouth, Kentucky 41040**